# 19-10, In Re: Kelly Grant, D.V.M.

# BEFORE THE ARIZONA VETERINARY MEDICAL EXAMINING BOARD

IN THE MATTER OF:

KELLY GRANT, D.V.M.

Holder of License No. 1465 For the practice of Veterinary Medicine in the State of Arizona,

Respondent.

Case No.: 19-10

CONSENT AGREEMENT FINDINGS OF FACT CONCLUSIONS OF LAW AND ORDER

In the interest of a prompt and judicious settlement of the above captioned matter before the Arizona State Veterinary Medical Examining Board ("Board") and consistent with the public interest, statutory requirements and responsibilities of the Board, and pursuant to A.R.S. §32-2201 et. seq. and A.R.S. § 41-1092.07 (F)(5), the undersigned party, Kelly Grant, D.V.M. ("Respondent"), holder of license No. 1465 for the practice of veterinary medicine in Arizona and the Board enter into this Consent Agreement, Findings of Fact, Conclusion of Law and Order ("Consent Agreement") as final disposition of this matter.

# **CONSENT AGREEMENT**

Respondent understands and agrees that:

- 1. The Board has jurisdiction over Respondent and the subject matter pursuant to A.R.S. §32-2201, <u>et. seq.</u>
- 2. Respondent has the right to consult with an attorney prior to entering into this Consent Agreement. Respondent has a right to a public hearing concerning this case. He further acknowledges that at such hearing she could

present evidence and cross-examine witnesses. Respondent irrevocably waives her right to such a hearing.

- 3. Respondent irrevocably waives any right to rehearing or review or to any judicial review or any other appeal of these matters.
- 4. The Consent Agreement, once approved by the Board and signed by the Respondent, shall constitute a public record, which may be disseminated as a formal action of the Board. Sufficient evidence exists for the Board to make the Findings of Fact and Conclusions of Law set forth in the Consent Agreement.
- 5. Respondent acknowledges and understands that this Consent Agreement will not become effective until the Board approves it and it is signed by the Board's Executive Director. Respondent acknowledges and agrees that upon signing and returning this Consent Agreement to the Board's Executive Director, Respondent may not revoke her acceptance of the Consent Agreement or make any modifications to the document, regardless of whether the Consent Agreement has been issued by the Executive Director.
- 6. If any part of the Consent Agreement is later declared void or otherwise unenforceable, the remainder of the Order in its entirety shall remain in force and effect.
- 7. Respondent acknowledges that any violation of this Consent Agreement constitutes unprofessional conduct pursuant to A.R.S. § 32-2232 and may result in disciplinary action pursuant to A.R.S. § 32-2234.
- 8. This Consent Agreement and Order is effective on the date signed by the Board.

DATED this 3 day of Jahnary 2019

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Kelly Grant, D.V.M.

# **FINDINGS OF FACT**

- 1. The Board is the duly constituted authority for the regulation and control of the practice of veterinary medicine in the State of Arizona.
- 2. Respondent holds license No. 1465 for the practice of veterinary medicine in the State of Arizona.
- 3. On August 4, 2017, "Bling Bling," an 11-year-old male Cockapoo was presented to Respondent for a red lesion on the abdomen evaluated. The medical record reads that the dog was presented for a dry nose, hair loss over the right eye, scratching at face and ears; check masses on entire body. The dog was currently on ½ Benadryl as needed. Upon exam, the dog had a weight = 29 pounds and a respiration rate = 80rpm; no temperature or heart rate dog will bite and was muzzled. Respondent noted that the dog was slightly overweight, joint effusion and peri-articular scar to both stifles, mild red conjunctiva, red skin on face and peri-ocular small red plaque of thickened skin just left of prepuce on ventral abdomen. Respondent's assessment was older dog, old injuries/arthritic stifles, and allergies. The following was recommended and administered to the dog:
  - a. Kenalog 0.3cc (concentration and route unknown);

In Re: Kelly Grant, D.V.M.

- b. Tramadol 50mg, 15 tablets;  $\frac{1}{2}$  -1 tablet orally every 12 hours as needed for pain;
- c. Recommended Benadryl 25mg twice a day for the next two weeks; and
- d. Recommended a daily joint supplement.
- 4. According to Complainant, she had to ask what signs or symptoms to watch for. Respondent advised that the dog may have increased thirst. No risks or warnings were discussed prior and no blood work was offered.
- 5. Complainant reported the dog began having increased thirst. Over the weekend the dog's thirst increased further and was up every hour or two to urinate.
- 6. On August 14, 2017, Complainant contacted Respondent's premise to report the dog was incontinent. According to Complainant, she was advised that this was normal and to wait to see how the dog would do by the end of the week. It is documented in the medical record that Respondent advised that the steroid should wear off by the end of the month.
- 7. Later that day, the dog was unaware he was in a puddle of urine. Additionally, the dog was disoriented, his hearing and gait were off, and had a greater increase in thirst and urination. Complainant made an appointment to be seen the following day.
- 8. On August 15, 2017, the dog was presented to Respondent due to polyuria/polydipsia. The dog was eating well, not lethargic and was currently on Benadryl and glucosamine supplements. Upon exam, the dog had a weight = 28.50 pounds, a pulse rate = 116bpm and a respiration rate = 90rpm; no temperature taken. Respondent noted that the skin lesion was gone and there

was licking occurring on the left front paw. Blood work and urinalysis was recommended and approved.

- 9. On August 16, 2017, Complainant was contacted with the results of the lab work by Respondent's associate, Dr. Wynn. She was advised that the dog had high blood glucose and glucose in the urine consistent with diabetes mellitus. Complainant became upset that the dog became diabetic as a result of the Kenalog injection; she was not told of the possible side effects. It was recommended Complainant come to the premise for insulin demo and to discuss diabetes in more detail. Complainant felt the premise should be financially responsible for the dog's treatment and requested to speak with a manager. Humulin N 100unit/mL give 3 units SQ every 12 hours give after meals.
- 10. Later that day, the premise manager contacted Complainant. Complainant reiterated that she felt the premise should be responsible for treating the dog's diabetes. She further felt that blood work should have recommended prior to the Kenalog injection. The manager explained that she spoke with both doctors and they felt it was not likely that one Kenalog injection would cause this issue. Additionally, blood work was not indicated in a patient with allergy concerns. Complainant requested to speak with higher management; the premise manager advised that her supervisor would not be available until later in the week.
- 11. Later, Complainant went to the premise to pick up the prescription for insulin. SKK advised that she had a donated bottle of Novolin N to give Complainant to help with the costs of treatment. Complainant advised that she

would like a copy of her dog's medical records as she no longer felt safe having her pet treated at that premise.

- 12. The dog was presented to Dr. Taetle at Pima North Animal Hospital. Dr. Taetle went over the dog's current history and examined the dog. His differentials were diabetes mellitus and iatrogenic Cushing's disease a glucose = 673mg/dl. He recommended insulin therapy be started under hospital supervision the following day.
- 13. Complainant was reluctant to start the insulin in hopes the diabetes would resolve as the steroid injection wore off.
- 14. On August 21, 2017, Dr. Taetle's associate, Dr. Walker, took over the case. Based on the dog not improving, Complainant agreed to start the dog on insulin.
- 15. Dr. Walker monitored the dog's diabetes. The dog's symptoms continued to improve on insulin and Complainant helped monitor the dog with glucose strips at home.

## **CONCLUSIONS OF LAW**

16. The Findings of Fact constitute administrative violation of **A.R.S. § 32-2233 (B) (3)** minor records violations that are routine entries into the medical record and that do not affect the diagnosis or care of the animal; failure to document in the medical record the concentration of Kenalog administered to the dog on August 4, 2017.

## **ORDER**

Based upon the foregoing Findings of Fact and Conclusions of Law, it is **ORDERED** that Respondent, License No. 1465, pay a civil penalty of two hundred

and fifty dollars (\$250.00) within 90 days of the effective date of the Consent Agreement. The civil penalty shall be paid in the form of a cashier's check, certified check, or money order made payable to the Arizona Veterinary Medical Examining Board.

- 1. Respondent shall obey all federal, state and local laws/rules governing the practice of veterinary medicine in this state.
- Respondent shall bear all costs of complying with this Consent Agreement.
- 3. This Consent Agreement is conclusive evidence of the matters described and may be considered by the Board in determining an appropriate sanction in the event a subsequent violation occurs. In the event Respondent violates any term of this Consent Agreement, the Board may, after opportunity for Informal Interview or Formal Hearing, take any other appropriate disciplinary action authorized by law, including suspension or revocation of Respondent's license.

ISSUED THIS 9 DAY OF January, 2018.

FOR THE BOARD:

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

Jim Loughead, Chairperson

By lectorea Whitmore

Victoria Whitmore, Executive Director

Original of the foregoing filed q@ This \_\_\_\_\_ day of forecast 2018 with:

Arizona State Veterinary Medical Examining Board 1740 W. Adams St, Ste. 4600